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CONFIRMATION NO. 7767

Bib Data Sheet

SERIAL NUMBER 10/717,423	FILING OR 371(c) DATE 11/19/2003 RULE	CLASS 280	GROUP ART UNIT 3618	ATTORNEY DOCKET NO. Gomez - BSLGCD
APPLICANTS Matthew Leroy Gomez, Lakewood, CO;				
** CONTINUING DATA ***** NONE BF 6-23-5 ** FOREIGN APPLICATIONS ***** NONE BF 6-23-5				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 02/17/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input checked="" type="checkbox"/> Allowance 6-23-5 Examiner's Signature Initials		STATE OR COUNTRY CO	SHEETS DRAWING 3	TOTAL CLAIMS 20 INDEPENDENT CLAIMS 3
ADDRESS Matthew L. Gomez P.O. Box 2745 Rock Springs , WY 82902				
TITLE Manual large game carrying device				
FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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APPLICANTS

Matthew Leroy Gomez, Lakewood, CO;

** CONTINUING DATA *****
NONE BF 10-4-4

** FOREIGN APPLICATIONS *****
NONE BF 10-4-4

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 02/17/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CO	SHEETS DRAWING 3	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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35 USC 119 (a-d) conditions met
☐ yes ☒ no ☐ Met after
Verifed and Acknowledged
Examiner's Signature *[Signature]* 10-4-4 Initials

ADDRESS
Matthew L. Gomez
P.O. Box 2745
Rock Springs, WY
82902

TITLE
Bicycle style large game carrying device

Manval

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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